

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO. 10811169  
ARMED CANTON

FLUO DATE

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	/					
2		/				
3	/					
4		/				
5	/					
6		/				
7	/					
8		/				
9	/					
10		/				
11		2				
12	/					
13		/				
14	/					
15		/				
16	/					
17		/				
18	/					
19		/				
20		①				
21	/					
22	/					
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28	/					
29	/					
30	/					
31	/					
32	/					
33	/					
34	/					
35	/					
36	/					
37	/					
38		5				
39	/					
40	/					
41	/					
42	/					
43	/					
44	/					
45		3				
46		0				
47	/					
48	/					
49	/					
50	/					
TOTAL IND.	35					
TOTAL DEP.	25					
TOTAL CLAIMS	60					

CLAIMS					
	IND	DEP		IND	DEP
51	/				
52	/				
53	/				
54		6			
55					
56					
57					
58					
59					
60					
61					
62					
63					
64					
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87					
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89					
90					
91					
92					
93					
94					
95					
96					
97					
98					
99					
100					
TOTAL IND.	3				
TOTAL DEP.	6				
TOTAL CLAIMS	9				